TOWN OF WESTFORD Building Department

WOOD STOVE PERMIT

	Date _		
Owner of Property		<u>.</u>	
Address of Owner			
STOVE SPECIFICATION'S			
Type of Stove			
Manufacturer		,	
Test Label	J 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11.		
Name Model No		_ Collar Size	
Dimensions: Height	Length	W	lidth
CHIMNE	Y SPECIFIC	CATIONS	
Chimney Type			
New Existing FI			
Other appliance's attached to flu			
Other appliance's attached to no	ie (ii ilietai, ili	ig., name an	u type/
Remarks			
			Duilding Incoces
			Building Inspector